



CITY OF ATLANTA

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AINSLEY CALDWELL, ARBORICULTURAL
MANAGER

REQUEST FOR POSTING AND INSPECTIONS

DATE _____

INSPECTOR _____

(NE) (NW) (SE) (SW)

COMPLETE SITE ADDRESS _____

SPECIAL INSTRUCTIONS _____

CONTACT NAME _____

CONTACT PHONE# _____ CELL# _____ FAX# _____

AFTER PRELIMINARY APPROVAL

TYPE OF INSPECTION:

PRE-CONFERENCE _____ POSTING _____ FINAL CO _____ TEMPORARY CO _____ OTHER _____

SUBMITTED BY _____

RELATIONSHIP TO SITE _____

UPON SUBMITTAL OF A POSTING REQUEST ARBORIST HAVE FIVE
BUSINESS DAYS TO RESPOND

SUBMITTAL OF REQUEST INDICATES THAT SITE CONDITIONS ARE IN COMPLIANCE
WITH THE **TREE PROTECTION ORDINANCE**.